

CONFERENCE VOLUNTEERS FORM

ICASA 2017 BILINGUAL CONFERENCE

ICASA 2017 conference's and propose myriad of workshop, sessions, and other featured, volunteers are needed for the ICASA 2017 BILINGUAL Conference.

Please indicate when you are available to volunteer

First Name

Last/Family Name

Institution

Address

City

State/Province/Country

Postal Code

Telephone ()

Fax Number ()

E-Mail

ICASA Membership

List Language you speak fluently English French

How many hours would you like to work? 1-10 10-19 20 40

Please check your preference below:

- Conference Information Center Electronic Message Center M&E
 Exhibitor Registration Posters Registration Faculty Session Room
 Board Room Airport Welcome Committee Opening & Closing Ceremony
 IT Satellite Session Community Village Logistics Wherever Needed

Please note: We will make every effort to fulfill your preference request. We cannot guarantee you will get your first or second request. Assignments will be based on receipt of forms and the needs of the conference program. In 2nd Dec 2017, you will be contacted by the committees to which you are assigned

Special Skills or Qualifications:

What skills do you have as a volunteer?

Previous Volunteer Experience

Have you worked as a volunteer?

Other organizations to which you have provided volunteer services

Contact in case of emergency

Name _____

Address _____

Phone # _____

Relationship _____

Do you have any criminal convictions?

Yes No If yes, please describe

Agreement and signature

By submitting this application, I affirm that the fact set forth in it are true and complete. I understand that if I am accepted as a volunteer, any false statements, omissions, or other misrepresentations made by me on this application may result in my immediate dismissal.

SUBMISSION METHODS: Submit your volunteer form to this email: volunteer@icasa2017cotedivoire.org